

Diagnosis

Patient: ISHIHARA, Yanji. Age: 59

Address: SUGANO, TAKASE-MURA, HODAI-GUN YAMAGATA Prefecture

Diagnosis: Vesical Papilloma of bladder and degenerated canceroid  
Papilloma

Symptoms: (1) Vesical pain (2) Vesical hemorrhage  
(3) Incontinence of urine (4) Frequency of urination  
and inveterate fever (5) Pusy urine

Medical history of patient: (1) Typhoid fever, in September,  
1905. (2) Internal suppurative tympanitis, in  
February, 1923.

Medical history of family: No hereditary traces of cancer or  
papilloma in either paternal or maternal lines.

Present Conditions: The patient has been suffering for twenty  
years from bleeding of the bladder, diagnosed as  
vesical papilloma. He was operated upon to remove  
the papilloma in 1935, and thereafter was under doctor's  
treatment. In a few years, the disease recurred  
causing the stoppage of urine. Then last year the  
disease was diagnosed by Doctor KITAGAWA as degenerated  
canceroid papilloma. Later he was taken to the Imperial  
University Hospital to undergo galvanocautery treatment

several times, but without effect. In February of the same year, he underwent x-ray and radium treatments in the Communication Hospital, but these treatments also proved ineffective. In May, he was operated on for papilloma (ventrotomy), but, in two weeks the disease recurred with soreness and bleeding of the bladder, incontinence of urine and fever (37.5 -38.0). He left the hospital in August. On January 20 of this year, he was operated upon for papilloma (by Doctor HASUMI) again at KINEBUCHI Hospital in the city of TSURUOKA, YAMAGATA Prefecture, and is still kept in bed.

Clinical observations: A few papillae and degenerative cancers of the size of a pigeon-egg or a walnut were found on the bottom as well as on the anterior surface of the bladder.

Development: After the operation on January 20, this year, the suture was favorably progressing, but, in a week pus formed accompanied by fever, causing the wound to open. By early March the infection healed and the suture was completed but another recurrence is possible since the patient suffers occasionally from vesical hemorrhage and excoriation.

Treatment: There are signs of cerebral anaemia and hematuria when the patient moves. I admit, that it will be difficult for him to walk or stand erect, not to mention a train trip. I admit that he must be kept a strict bed-patient till next August. His appearance in court would be naturally impossible.

On this 20th day of March, 1947.

HASUMI, Kiichirō, Doctor of Medicine  
(seal)

Chief of the SUGINAMI Surgery, 4-340  
ASAGAYA, SUGINAMI Ward, Tokyo.

I hereby certify that the above was signed in my presence on the same day at the same place.

YAMADA, Hanzo  
(seal)

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YAMADA, Hanzo

(seal)

TRANSLATION CERTIFICATE

I, Arthur A. Misaki, of the Defense Language Branch,  
hereby certify that the foregoing translation is, to the best  
of my knowledge and belief, a correct translation and is  
as near as possible to the meaning of the original document.

/s/ Arthur A. Misaki

Tokyo, Japan  
Date 29 March 1947

診 斷 書

患 者 石 原 莞 爾

五十九歳

住 所 山形縣飽海郡高瀬村菅野

診 斷

膀胱乳嚢腫及癌變性乳嚢腫

(一)膀胱痛 (二)膀胱出血 (三)尿失禁 (四)尿意瀕歟

過去既往症

(一)明治三八年九月(一九〇五年)腸チブス

(二)昭和三年二月(一九二八年)兩側化膿性中耳炎罹患

家族歴

父系及母系ニ癌乃至乳嚢腫遺傳ナシ

現 症

二〇年來膀胱出血、診膀胱乳嚢腫、昭和八年(一九三三年)乳嚢腫摘

手術所見

出手術其後患者ノ治療續行セルモ二三年後再ヒ再發遂ニ尿閉ヲ來タシ  
 昨年北川博士ニヨリ癌變性乳嚢腫ノ診斷ヲ受ク其後帝大病院ニ入院電  
 氣燒灼療法ヲ數回受ク然シ效果ナシ同年二月逕信病院ニテX線並ラヂ  
 ウム治療ヲ受ケタルモ效ナク同年五月摘出手術（開腹術）ヲ受ケタリ  
 然シ二週間後再發膀胱出血膀胱痛尿失禁、發熱（三七、五一三八、〇）  
 アリ八月同病院退院ス  
 本年一月二十日乳嚢腫手術ヲ山形縣鶴岡市木根淵病院ニテ行フ（手術  
 者意見）現在尙臥床中

鳩卵大乃至ハタルミ大ノ乳嚢腫及癌變性腫ヲ膀胱底面及前面ニ數個  
 認メタリ

経過

本年一月二十日摘出手術後創面癒合自好ナリシモ一週間後創面化膿  
 熱アリ皮膚創面離開シ三月初旬創面治療時々膀胱出血上皮剝脫アリテ  
 再發ノ危險ナシトセス

治療

動作ニヨリ腦貧血發作血尿ヲ認ムルヲ以テ汽車旅行ハ勿論歩行直立困難ト認ム本年八月迄絶對安靜臥床ヲ必要ト認ム勿論法廷出席ハ不可能ナリ

以上

昭和二十二年（一九四七年）三月二十日

東京都杉並區阿佐ヶ谷四丁目三四〇

杉並外科病院

院長醫學博士

蓮

見

喜一郎

右署名ハ自分ノ面前ニ於テ爲サレタルコトヲ證明ス

同日同所ニ於テ

山田

半

踐